Entered 10/26/07 13:24:56 Desc Main Case 07-19932 Doc 1 Filed 10/26/07 Document Page 1 of 47 Official Form 1 (10/06) United States Bankruptcy Court DISTRICT OF **Voluntary Petition** Illinois. Northern Name of Debtor (if individual, enter Last, First, Middle) Name of Joint Debtor (Spouse) (Last, First, Middle): ENGLAND, ARACELIS All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than one, Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than state all): one, state all): Street Address of Debtor (No. and Street, City, and State): Street Address of Joint Debtor (No. and Street, City, and State): 2140 N. KOSTNER CHICAGO, IL 60639 ZIP Code County of Residence or of the Principal Place of Business: County of Residence or of the Principal Place of Business COOK Mailing Address of Debtor (if different from street address): Mailing Address of Joint Debtor (if different from street address): ZIP Code ZIP Code Location of Principal Assets of Business Debtor (if different from street address above): ZIP Code Type of Debtor Nature of Business Chapter of Bankruptcy Code Under Which (Form of Organization) (Check one box.) the Petition is Filed (Check one box.) (Check one box.) Health Care Business Chapter 7 Chapter 15 Petition for Individual (includes Joint Debtors) Single Asset Real Estate as defined in Chapter 9 Recognition of a Foreign See Exhibit D on page 2 of this form. 11 U.S.C. § 101(51B) Main Proceeding Chapter 11 Corporation (includes LLC and LLP) Railroad Chapter 12 Chapter 15 Petition for Partnership Chapter 13 Stockbroker Recognition of a Foreign Other (If debtor is not one of the above entities, Commodity Broker Nonmain Proceeding check this box and state type of entity below.) Clearing Bank Other Nature of Debts (Check one box.) Tax-Exempt Entity (Check box, if applicable.) ☑ Debts are primarily consumer Debts are primarily debts, defined in 11 U.S.C. business debts.

| | | | | ۱u | | a tax-exempt org | | | (8) as "incurred | |
|--|-------------------------------------|-----------------------|----------------|--|----------------|---|----------------------------------|--|---|---|
| | | | | under Title 26 of the Un Code (the Internal Rever | | | | | idual primarily f | |
| | | | | | Code (the | internal Revenue | Code). | | nal, family, or h | ouse- |
| | | T914 T | (0) | | | | | [noid | purpose." | |
| | | ruing r | ee (Check or | ne box.) | | 1 | <i>~</i> | | Chapter 12 | Debtors |
| lп | Full Filing Fee atta | ahad | | | | | Check one bo | | 4-14 | 4-G4:- 11 N.C.O. 8 101(51D) |
| Ш | run rung ree atta | tacned. | | | | ☐ Debtor i | s a small bu | isiness debtor as | defined in 11 U.S.C. § 101(51D). | |
| Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. | | | | btor is Form 3A. | Check if: | | | r as defined in 11 U.S.C. § 101(51D). | | |
| | Filing Fee waiver i | equested (and | alicable to cl | hanter 7 ind | ividuale only | | | | noncontingent lie are less than \$2 | quidated debts (excluding debts owed to |
| _ | attach signed appli | | | | | | instucis | | | |
| | | | | | , | Accepta | s being filed nces of the | l with this petitic plan were solicit | on. ed prepetition from one or more classes U.S.C. § 1126(b). | |
| Statistical/Administrative Information | | | | 01 0100 | 1075, 111 4000 | JI GALLOO WILLIAM I I | THIS SPACE IS FOR COURT USE ONLY | | | |
| | Debtor estima | ites that, after | any exempt | property is | excluded an | unsecured credit d administrative to unsecured crec | | | | |
| Estir | nated Number of Cr | editors | | - | | | | | | |
| 1 | - 50- | 100- | 200- | 1,000- | 5,001- | 10,001- | 25,001- | 50,001 | Over | |
| 49 | 99 | 199 | 999 | 5,000 | 10,000 | 25,000 | 50,000 | 100,000 | 100,000 | |
| ☑ | | | | | | | | | | |
| □\$6 | nated Assets 0 to 10,000 | □\$10,000 \$100,00 | | □\$100,0 \$1 mili | | □\$1 million to | | ore than \$10 | 00 million | |
| □\$(| nated Liabilities) to 50,000 | □\$50,000 \$100,00 | | \$100,0 \$1 mil | | □\$1 million to \$100 million | _ | ore than \$10 | 00 million | |
| | | | | | | | | | | |

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| Official Form 1 (10/06) | Document F | Page 2 of 47 | Form B1, Page 2 |
|--|---|---|--|
| Voluntary Petition | npleted and filed in every case.) | Name of Debtor(s): ENGLAND, ARACEL | IS |
| (inis page musi ve com | All Prior Bankruptcy Cases Filed Within Last 8 Yo | | |
| Location | | Case Number: | Date Filed: |
| Where Filed: Location | | Case Number: | Date Filed: |
| Where Filed: | | | |
| Pen Name of Debtor: | nding Bankruptcy Case Filed by any Spouse, Partner, or Affili | iate of this Debtor (If more than one, attach add Case Number: | ditional sheet.) Date Filed: |
| Name of Decion. | | Case reuniber. | Date Filed. |
| District: | | Relationship: | Judge: |
| 10Q) with the Securitie of the Securities Exchan | Exhibit A ebtor is required to file periodic reports (e.g., forms 10K and es and Exchange Commission pursuant to Section 13 or 15(d) ange Act of 1934 and is requesting relief under chapter 11.) | Exhibit B (To be completed if debtor whose debts are primarily or I, the attorney for the petitioner named in the have informed the petitioner that [he or she] 12, or 13 of title 11, United States Code available under each such chapter. I further of debtor the notice required by 11 U.S.C. § 3420 X | onsumer debts.) foregoing petition, declare that I may proceed under chapter 7, 11, and have explained the relief certify that I have delivered to the (b). |
| | _ | Signature of Attorney for Debtor(s) | Date) |
| | Exhibit | c | |
| Does the debtor own or | r have possession of any property that poses or is alleged to pose: | | blic health or exfetu? |
| | | a uncar or minimon and identification main to pu | one nearest or survey . |
| Yes, and Exhibit | t C is attached and made a part of this petition. | | |
| □ No. | | | |
| ☐ Exhibit D of | Exhibit by every individual debtor. If a joint petition is filed completed and signed by the debtor is attached and a tition: also completed and signed by the joint debtor is attac Information Regarding t (Check any applie | d, each spouse must complete and attace made a part of this petition. Sched and made a part of this petition. | h a separate Exhibit D.) |
| prec | otor has been domiciled or has had a residence, principal place of ceding the date of this petition or for a longer part of such 180 day | f business, or principal assets in this District for ys than in any other District. | 180 days immediately |
| ☐ The | ere is a bankruptcy case concerning debtor's affiliate, general part | ner, or partnership pending in this District. | |
| has | btor is a debtor in a foreign proceeding and has its principal place no principal place of business or assets in the United States but it District, or the interests of the parties will be served in regard to | is a defendant in an action or proceeding [in a fe | |
| | Statement by a Debtor Who Resides as (Check all applica | | |
| L | Landlord has a judgment against the debtor for possession of debt | or's residence. (If box checked, complete the fo | ollowing.) |
| | | (Name of landlord that obtained judgment) | |
| | | (Address of landlord) | to the second |
| | Debtor claims that under applicable nonbankruptcy law, there are entire monetary default that gave rise to the judgment for possessi | | |
| | Debtor has included with this petition the deposit with the court of filing of the petition. | f any rent that would become due during the 30- | day period after the |

| Voluntary Petition (This pase as the Complete Base) Filed 10/26/07 | Name of Debtor(s): Entered 10/26/07/1/8:24:5/ Dego Main |
|---|--|
| Document _{igna} | rage 3 0147 |
| Signature(s) of Debtor(s) (Individual/Joint) | Signature of a Foreign Representative |
| I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by § 342(b) of the Bankruptcy Code. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. Signature of Debtor X Signature of Joint Debtor Telephone Number (If not represented by attorney) | l declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached. Pursuant to § 1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X (Signature of Foreign Representative) Date |
| Date | |
| Signature of Attorney X Palual Flantis Signature of Attorney for Debtor(s) Printed Name of Attorney for Debtor(s) ALLAM ZANNYED + ASSCIATES Firm Name 550 S: HARLEM# G Address Address Printed Number 10-15-2007 Date | Signature of Non-Attorney Bankruptcy Petition Preparer I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.Official Form 19B is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.) |
| Signature of Debtor (Corporation/Partnership) | Address |
| I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. | XDate |
| X Signature of Authorized Individual | Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above. Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition |
| Printed Name of Authorized Individual | preparer is not an individual: If more than one person prepared this document, attach additional sheets |
| Title of Authorized Individual Date | conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156. |

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Official Form 6 - Summary (10/06)

| | United Sta | United States Bankruptcy Court | | | | | |
|---------|--------------------|--------------------------------|---|--|--|--|--|
| | Northern | District Of Illinois | | | | | |
| In re _ | ENGLAND, ARACELIS, | Case No | | | | | |
| | Debtor | Chapter | 7 | | | | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|---------------|-------------|--------------|------------|
| A - Real Property | Yes | 1 | \$0.00 | | |
| B - Personal Property | Yes | 3 | \$4,020.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | \$ 0 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 3 | | * O | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 4 | | \$ 26,675.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | , |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | \$2,400.00 |
| J - Current Expenditures of Individual Debtors(s) | . Yes | 1 | , | | \$2,322.00 |
| то | TAL | 17 | \$ 4,020,00 | \$26,675.00 | |

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Official Form 6 - Statistical Summary (10/06)

United States Bankruptcy Court

| | | Northern | District Of _ | Illinois | <u></u> |
|---------|------------------|-------------|---------------|----------|---------|
| In re _ | ENGLAND, ARACELI | <u>S_</u> , | | Case No. | |
| | Debtor | | | Chapter | 7 |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E) | \$0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed) | \$0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) | \$0.00 |
| Student Loan Obligations (from Schedule F) | \$0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$0.00 |
| TOTAL | \$0 |

State the following:

| Average Income (from Schedule I, Line 16) | \$2,400.00 |
|--|------------|
| Average Expenses (from Schedule J, Line 18) | \$2,322.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | \$2,400.00 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$0 |
|--|--------|-------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$0.00 |
| 4. Total from Schedule F | | \$26,675.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$12,600.00 |

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| Form B6A (10/05) | Document | rage 0 01 47 | | |
|---------------------|----------|--------------|----------|------|
| ENGLAND, ARACELIS | | | | |
| In re | , | | Case No. | |
| Debtor | | | (If kn | own) |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--------------------------------------|--|---------------------------------------|--|-------------------------------|
| NONE | | | 100 | |
| | | | | |
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| | To | tal> | 0.00 | |

(Report also on Summary of Schedules.)

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Form B6B (10/05)

| In re | ENGLAND, ARACELIS | , | Case No. | |
|-------|-------------------|---|------------|--|
| | Debtor | | (If known) | |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

| | | | - | |
|---|------------------|--|---------------------------------------|--|
| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
| 1. Cash on hand. | | Cash on person | w | \$20.00 |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Checking account at Chase Bank | w | \$1,400.00 |
| Security deposits with public utilities, telephone companies, landlords, and others. | х | | | |
| Household goods and furnishings, including audio, video, and computer equipment. | | Household furniture located at Debtor's Domicile | w | \$700.00 |
| 5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles. | х | | | |
| 6. Wearing apparel. | | Clothing located at Debtor's Domicile | w | \$400.00 |
| 7. Furs and jewelry. | х | , | | |
| 8. Firearms and sports, photographic, and other hobby equipment. | х | | | |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | х | | | |
| 10. Annuities. Itemize and name each issuer. | х | | | , |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)). | х | | | |

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| In re | ENGLAND, ARACELIS | Case No. |
|-------|-------------------|------------|
| | Debtor | (If known) |

SCHEDULE B - PERSONAL PROPERTY

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|---|---------------------------------------|--|
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | х | | | |
| Stock and interests in incorporated and unincorporated businesses. Itemize. | x | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | х | | | |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments. | x | | | |
| 16. Accounts receivable, | | | | |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | x | | | |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars. | x | • | | |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A – Real Property. | x | | | |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | x | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | х | | | |
| | | | | |

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Form B6B-cont. (10/05)

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| | Doc |

| [n re _ | ENGLAND, ARACELIS | , | Case No. |
|---------|-------------------|---|------------|
| | Debtor | | (If known) |

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|----------------------|---|---------------------------------------|---|
| 22. Patents, copyrights, and other intellectual property. Give particulars. | х | | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | х | | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | 1999 Crysler Sebring | | w | \$1,500.00 |
| 26. Boats, motors, and accessories. 27. Aircraft and accessories. | х | | | |
| 28. Office equipment, furnishings, and supplies. | x | | | |
| 29. Machinery, fixtures, equipment, and supplies used in business. | x | | | * |
| 30. Inventory. | x | | | |
| 31. Animals. | х | | | |
| 32. Crops - growing or harvested. Give particulars. | х | | | |
| 33. Farming equipment and implements. | х | | | |
| 34. Farm supplies, chemicals, and feed. | х | | | |
| 35. Other personal property of any kind not already listed. Itemize. | х | • | | |

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

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| In re | ENGLAND, ARACELIS | Case No. |
|-------|-------------------|------------|
| | Debtor | (If known) |

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)

☐ 11 U.S.C. § 522(b)(2) ☐ 11 U.S.C. § 522(b)(3)

☑ Check if debtor claims a homestead exemption that exceeds \$125,000.

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|---|--|----------------------------------|---|
| Debtor's Clothing | 735 ILC5 5/12-1001 (a) | \$400.00 | \$400.00 |
| Household furnishings at Debtors Domicile | 735 ILC5 5/12-1001 (b) | \$700.00/4,000.00 | \$700.00 |
| Cash | 735 ILC5 5/12-1001 (b) | \$20.00/\$4,000.00 | \$20.00 |
| Checking | 735 ILC5 5/12-1001 (b) | \$1,400.00/\$4,000.00 | \$1,400.00 |
| Chrysler Sebring | 735 ILC5 5/12-1001 (c) | \$1,500.00/\$2,400.00 | \$1,500.00 |

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Official Form 6D (10/06)

| In re | ENGLAND, ARACELIS | Case No. | |
|-------|-------------------|------------|--|
| | Dobtor | (if known) | |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Z

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND | | WIFE, OR VITY | DATE CLAIM WAS | Į. | ED | İ | AMOUNT OF CLAIM | UNSECURED |
|--|----------|---|---|------------|--------------|----------|--|---|
| MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE JOINT, OR COMMUNITY | INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | WITHOUT DEDUCTING VALUE OF COLLATERAL | PORTION, IF ANY |
| ACCOUNT NO. | | | | | | | | |
| | | | | | | | | |
| | | | | | | ļ | | |
| | | | VALUE\$ | İ | | | | |
| ACCOUNT NO. | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | 1 | | | |
| | | | VALUE \$ | ŀ | | | | , |
| ACCOUNT NO. | | | | | | | | , |
| | 1 | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | VALUE \$ | - | | | | |
| continuation sheets | I | L | Subtotal ► (Total of this page) | <u> </u> | 5 | <u> </u> | \$0 | \$0 |
| anaonea | | | Total ► (Use only on last page) | | | | \$ 0.00 | \$0.00 |
| | | | (coe only on mor page) | | | | (Report also on Summary of Schedules.) | (If applicable, report also on Statistical Summary of Certain Liabilities and Relate |

Data.)

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Official Form 6E (10/06)

| In re | ENGLAND, ARACELIS , | Case No. |
|-------|---------------------|------------|
| | Debtor | (if known) |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| Data. |
|---|
| Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| Domestic Support Obligations |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| Extensions of credit in an involuntary case |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| Wages, salaries, and commissions |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000* per person earned within 180 days immediately preceding the filing of the original petition, or the |

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Entered 10/26/07 13:24:56 Case 07-19932 Doc 1 Filed 10/26/07 Desc Main Document Page 13 of 47 Official Form 6E (10/06) - Cont. ENGLAND, ARACELIS (if known) Debtor Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$4,925* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). Deposits by individuals Claims of individuals up to \$2,225* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). * Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

O continuation sheets attached

| | Case 07-19932 | Doc 1 | | Entered 10/26/07 | 13:24:56 | Desc Mair |
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| n re | ENGLAND, ARA | CELIS | | Case No. | | |

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child"

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED AMOUNT OF CREDITOR'S NAME. DATE CLAIM WAS CONTINGENT CODEBTOR DISPUTED MAILING ADDRESS **INCURRED AND** CLAIM CONSIDERATION FOR INCLUDING ZIP CODE. AND ACCOUNT NUMBER CLAIM. (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. ACCOUNT NO. 2480604392 Credit Card JC Penny \$1,300.00 w P.O. Box 960001 Orlando, FL 32896 9327969008 ACCOUNT NO. Credit Card Target National Bank \$450.00 W P.O. Box 59317 Minneapolis, MN 55459-0317 ACCOUNT NO. 7714120293051389 Credit Card Sams Club \$850.00 P.O. Box 530942 W Atlanta, GA 30353-0942 ACCOUNT NO. 01291461435 Credit Card Sprint \$800.00 w P.O. Box 219554 Kansas City, MO 64121-9554 s 3, 400,00 Subtotal➤ S continuation sheets attached (Use only on last page of the completed Schedule F.)

(Report also on Summary of Schedules and, if applicable, on the Statistical

Summary of Certain Liabilities and Related Data.)

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| In re | ENGLAND, ARACELIS, | Case No. |
|-------|--------------------|------------|
| | Debtor | (if known) |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|----------|--|---|------------|--------------|----------|--------------------|
| ACCOUNT NO. 5049940113616576 Sears Credit Cards P.O. Box 183081 Columbus, OH 43218-3081 | : | w | Credit Card | | | : | \$600.00 |
| ACCOUNT NO.5856370689297449 WFNNB - Harlem Furniture P.O. Box 659704 San Antonio, TX 78265-9704 | | w | Credit Card | | | | \$2,400.00 |
| ACCOUNT NO.4266841119692240 Chase Visa Cardmember Service P.O. Box 15153 Wilmington, DE 19886-5153 | | w | Credit Card | | | | \$650.00 |
| ACCOUNT NO. 6011007810272053 Discover P.O. Box 30395 Salt Lake City, UT 84130-0395 | | w | Credit Card | | | | \$6,600.00 |
| ACCOUNT NO.4862362650981957 Capital One P.O. Box 70884 Charlotte, NC 28272-0884 | | . w | Credit Card | | | | \$650.00 |
| Sheet no of 3 continuation sheets attacto Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Use only on last page of the also on Summary of Schedules and, if app | | ed Scheo | | \$10,900.00 |

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| In re | ENGLAND, ARACELIS | , | Case No | |
|-------|-------------------|---|------------|--|
| | Debtor | | (if known) | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------|--|---|------------|------------------------|-----------|--------------------|
| ACCOUNT NO. 5491100008727722 | | | Credit Card | | | | |
| Household Bank HSBC Card Services P.O. Box 17051 Baltimore, MD 21297-1051 | | w | | | | | 1,000.00 |
| ACCOUNT NO. 274299702 | | | Cell Phone Bill | | | | |
| Cingular Wireless P.O. Box 6428 Carol Stream, IL 60197-6428 | | w | | | | | \$400.00 |
| ACCOUNT NO. 3426600903 | | | Medical Bill | | | | |
| Quest Diagnostics Incoporated c/o American Medical Collection 2269 S. Saw Mill River Road, Building 3 Elmsford, NY 10523 | | w | | | | | \$150.00 |
| ACCOUNT NO. 782 | | 1 | Pet Medical Bill | | | | |
| Chicago Pet Clinic 3510 N. Cicero Ave. Chicago, IL 60641 | | w | | | | | \$750.00 |
| ACCOUNT NO. 1176339901 | | | Credit Card | | | | |
| Carson Pirie Scott Retail Services P.O. Box 17264 Baltimore, MD 21297-1264 | | w | \$ | | | | \$200.00 |
| Sheet no. 2 of 3 continuation sheets atta to Schedule of Creditors Holding Unsecur Nonpriority Claims | ched ed | | | • | Sub | total≻ | \$2,500,00 |
| | | (Report | (Use only on last page of the also on Summary of Schedules and, if app Summary of Certain Liabi | licable c | ed Scheo on the Sta | itistical | \$ |

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| In re | ENGLAND, ARACELIS, | Case No |
|-------|--------------------|------------|
| | Debtor | (if known) |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| | | | <u>, </u> | | | | |
|---|------------|--|---|------------|-----------------------|----------|--------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 00198999179 | | | Music Subcription | | | | |
| Reader's Digest Payment Processing P.O. Box 8010 Prescott, AZ 86304-8010 | | w | | | | | \$100.00 |
| ACCOUNT NO. 3673292 | | | Newspaper Subcription | | | | |
| Chicago Tribune c/o Biehl & Biehl P.O. Box 66415 Chicago, IL 60666-0415 | | w | | | | | \$75.00 |
| ACCOUNT NO. 25345054701 | | | Loan | | | | |
| Pentagon Federal Credit Union P.O. Box 1432 Alexandria, VA 22313-2032 | | w | | | | | \$9,700.00 |
| ACCOUNT NO. | | | | | | | |
| | | | | | | | |
| ACCOUNT NO. | | | | | | | |
| | | | | | | | |
| Sheet no 3_of 3 continuation sheets attact to Schedule of Creditors Holding Unsecure Nonpriority Claims | ched ed | | | | Sut | ototal> | 19,875.00 |
| • | | (Report | (Use only on last page of the also on Summary of Schedules and, if app Summary of Certain Liabi | licable o | ed Scheo n the Sta | tistical | \$ 26,675.0 |

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| Form B6G (10/05) | | |
|---------------------|-------------------|------------|
| In re | ENGLAND, ARACELIS | Case No |
| | Debtor | (if known) |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|--|--|
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| In re | ENGLAND, ARACELIS | , | Case No. | _ |
|-------|-------------------|---|------------|---|
| | Debtor | | (if known) | |

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR | | |
|--|---|--|--|
| Daisy Centeno Morales Avenida Escorial 114 Capara Heights San Juan, Puerto Rico 00921 | Pentagon Federal Credit Union PO Box 1432 Alexandria, VA 22313-2032 | | |
| | | | |
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|---------------|------------|--------|-----|--|--------------|
| In re | ENGLAND, A | ARACEL | IS, | Case No | (if known) |
| | 2000 | | | | (II KIIOWII) |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

| Debtor's Marital | DEPENDENTS OF DEBTOR AND SPOUSE | | | | | |
|--|--|----------------------------------|---|--|--|--|
| Status: | RELATIONSHIP(S): | (S): | | | | |
| Employment: | DEBTOR | | SPOUSE | | | |
| Occupation | Consultant | | | | | |
| Name of Employer | | | | | | |
| How long employed Address of Employ | | | | | | |
| Address of Employ | | | | | | |
| | 333 S. Ashland Chicago, IL 60607 | | | | | |
| ICOME: (Estimate case f | of average or projected monthly income at time | DEBTOR | SPOUSE | | | |
| cusc i | nea; | \$\$2,400.00 | \$ | | | |
| Monthly gross was | ges, salary, and commissions | * <u>mz., 100.00</u> | <u> </u> | | | |
| (Prorate if not pa | | \$ <u>0.00</u> | \$ | | | |
| Estimate monthly | overtime | | | | | |
| SUBTOTAL | | a) I a) I | ** | | | |
| | | \$NaN | \$ <u>0</u> | | | |
| LESS PAYROLL | | 0.00 | • | | | |
| a. Payroll taxes an | nd social security | \$ <u>0.00</u> | <u>\$</u> | | | |
| b. Insurance | | \$ <u>0.00</u> | \$ | | | |
| c. Union dues | : medicare/pension | \$ <u>0.00</u> \$ <u>0.00</u> | <u>\$</u> | | | |
| u. Other (Specify) | . <u>medicate/pension</u> | Ψ <u>0.00</u> | <u> </u> | | | |
| SUBTOTAL OF P | AYROLL DEDUCTIONS | \$ <u>0</u> | \$ <u>O</u> | | | |
| TOTAL NET MOI | NTHLY TAKE HOME PAY | \$ <u>0</u> | <u>\$0</u> | | | |
| Regular income fro | om operation of business or profession or farm | \$0.000 | \$ | | | |
| (Attach detailed | statement) | \$0.00 | • | | | |
| Income from real p | | | Φ | | | |
| Interest and divide | nds nance or support payments payable to the debtor for | \$0.00 | \$ | | | |
| | e or that of dependents listed above | \$ <u>0.00</u> | \$ | | | |
| | government assistance | | | | | |
| (Specify): | <u> </u> | \$ 0.00 | \$ | | | |
| 2. Pension or retiren | | - | ¢ | | | |
| 3. Other monthly in | come | \$ | D | | | |
| (Specify): | | \$0.00 | \$ | | | |
| . SUBTOTAL OF | LINES 7 THROUGH 13 | \$ <u>0</u> | \$ <u>0</u> | | | |
| 5. AVERAGE MON | NTHLY INCOME (Add amounts shown on lines 6 and 14) | \$2,400.00 | <u>\$0</u> | | | |
| 6. COMBINED AV | ERAGE MONTHLY INCOME: (Combine column totals | \$ <u>0</u> | | | | |
| from line 15; if there i | s only one debtor repeat total reported on line 15) | | ary of Schedules and, if applicable, of Certain Liabilities and Related Data) | | | |
| 7. Describe any incr | ease or decrease in income reasonably anticipated to | · | , | | | |
| • | | , , , , , , , , , , , , , , , , | | | | |
| | | | | | | |

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| In re | ENGLAND, ARACELIS | , | Case No. |
|-------|-------------------|---|------------|
| | Debtor | | (if known) |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time cas weekly, quarterly, semi-annually, or annually to show monthly rate. | e filed. Prorate any payments made bi- |
|--|---|
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule | of expenditures labeled "Spouse." |
| Rent or home mortgage payment (include lot rented for mobile home) | \$580.00 |
| a. Are real estate taxes included? Yes No X | |
| b. Is property insurance included? Yes NoX | |
| 2. Utilities: a. Electricity and heating fuel | \$ |
| b. Water and sewer | \$ |
| c. Telephone | \$ <u>120.00</u> |
| d. Other | \$ |
| 3. Home maintenance (repairs and upkeep) | \$ |
| 4. Food | \$ <u>400.00</u> |
| 5. Clothing | \$ <u>60.00</u> |
| 6. Laundry and dry cleaning | \$ <u>50.00</u> |
| 7. Medical and dental expenses | \$ <u>130.00</u> |
| 8. Transportation (not including car payments) | \$ <u>450.00</u> |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ <u>45.00</u> |
| 10.Charitable contributions | \$ <u>0.00</u> |
| 11.Insurance (not deducted from wages or included in home mortgage payments) | |
| a. Homeowner's or renter's | \$ <u>0.00</u> |
| b. Life | \$ <u>0.00</u> |
| c. Health | \$ <u>0.00</u> |
| d. Auto | \$ <u>32.00</u> |
| e. Other | \$ <u>0.00</u> |
| 12.Taxes (not deducted from wages or included in home mortgage payments) (Specify) | \$ <u>0.00</u> |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | |
| a. Auto | \$ <u>0.00</u> |
| b. Other | \$ <u>0.00</u> |
| c. Other | \$ |
| 14. Alimony, maintenance, and support paid to others | \$ |
| 15. Payments for support of additional dependents not living at your home | \$ <u>0.00</u> |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ <u>0.00</u> |
| 17. Other Taxes/Toiletries/Pet Supplies/Cable | <u>\$ 455.00</u> |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ <u>2322</u> |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this docu | ment; |
| 20. STATEMENT OF MONTHLY NET INCOME | |
| a. Average monthly income from Line 15 of Schedule I | _{\$} 2,400.00 |
| b. Average monthly expenses from Line 18 above | \$2,400.00 \$2322 \$ 78.00 |
| c. Monthly net income (a. minus b.) | s 78.00 |

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Output

Description Description (15 known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

| · | , 🔎 |
|--|--|
| I declare under penalty of perjury that I have read the | foregoing summary and schedules, consisting of |
| sheets, and that they are true and correct to the best of my l | |
| Date 10-15-2007 | Signature: X. Wocel's Capt of Debtor |
| Date | Signature:(Joint Debtor, if any) |
| | [If joint case, both spouses must sign.] |
| DECLARATION AND SIGNATURI | E OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) |
| provided the debtor with a copy of this document and the notic been promulgated pursuant to 11 U.S.C. § 110(h) setting a ma | by petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have ces and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have eximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the or a debtor or accepting any fee from the debtor, as required by that section. |
| Printed or Typed Name of Bankruptcy Petition Preparer | Social Security No. (Required by 11 U.S.C. § 110.) |
| lf the bankruptcy petition preparer is not an individual, state t who signs this document. | the name, title (if any), address, and social security number of the officer, principal, responsible person, or parinc |
| | |
| Address | |
| x | |
| Signature of Bankruptcy Petition Preparer | Date |
| Names and Social Security numbers of all other individuals w | the prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: |
| | ional signed sheets conforming to the appropriate Official Form for each person. |
| A bankrupicy petition preparer's failure to comply with the provision 18 U.S.C. § 156. | ons of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 1. |
| DECLARATION UNDER PENAL | TY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP |
| the partnership] of the | president or other officer or an authorized agent of the corporation or a member or an authorized agent of[corporation or partnership] named as debtor in this case, declare under penalty of perjury that I |
| have read the foregoing summary and schedules, consisting to the best of my knowledge, information, and belief. | g of sheets, and that they are true and correct (Total shown on summary page plus 1.) |
| Date | |
| Y | Signature: |
| | [Print or type name of individual signing on behalf of debtor.] |
| [An individual signing on behalf of a partnership or corpo | |
| Donath, for mobile a false statement as above like account | notic Figure to \$500,000 as imprisonment for us to Fugure as held, 10 U.S.C. 55 150 and 0.714 |

Official Form 7 (10/05)

2006 \$26,713.00

2005 \$26,157.00

UNITED STATES BANKRUPTCY COURT

| | UNITED ST | ALES BANKRUPIC | A COURT |
|---|---|--|---|
| | Northern | DISTRICT OF | Illinois |
| In re: | ENGLAND, ARACELIS Debtor | , Case No | (if known) |
| | STATEMI | ENT OF FINANCIAL | AFFAIRS |
| informa filed. A should p affairs. | rmation for both spouses is combined. If tion for both spouses whether or not a joi an individual debtor engaged in business a provide the information requested on this | the case is filed under chapter 12 nt petition is filed, unless the spoas a sole proprietor, partner, fami statement concerning all such acminor child in this statement. In | tivities as well as the individual's personal dicate payments, transfers and the like to minor |
| addition | mplete Questions 19 - 25. If the answer | to an applicable question is "N question, use and attach a separat | have been in business, as defined below, also lone," mark the box labeled "None." If the sheet properly identified with the case name, |
| | | DEFINITIONS | |
| the filin of the v self-em | all debtor is "in business" for the purpose g of this bankruptcy case, any of the follo oting or equity securities of a corporation ployed full-time or part-time. An individ- s in a trade, business, or other activity, oth | of this form if the debtor is or ha owing: an officer, director, manag ; a partner, other than a limited p ual debtor also may be "in busing | he debtor is a corporation or partnership. An as been, within six years immediately preceding ging executive, or owner of 5 percent or more partner, of a partnership; a sole proprietor or ess" for the purpose of this form if the debtor ement income from the debtor's primary |
| 5 percei | atives; corporations of which the debtor i | s an officer, director, or person in es of a corporate debtor and their | the debtor; general partners of the debtor and a control; officers, directors, and any owner of relatives; affiliates of the debtor and insiders |
| | · | <u>:</u> | |
| | 1. Income from employment or ope | eration of business | |
| Нопе | the debtor's business, including part-tin beginning of this calendar year to the d two years immediately preceding this the basis of a fiscal rather than a calend of the debtor's fiscal year.) If a joint pe | ne activities either as an employed ate this case was commenced. So calendar year. (A debtor that make a year may report fiscal year in etition is filed, state income for eate income of both spouses whether | nent, trade, or profession, or from operation of see or in independent trade or business, from the tate also the gross amounts received during the intains, or has maintained, financial records on come. Identify the beginning and ending dates ach spouse separately. (Married debtors filing her or not a joint petition is filed, unless the |
| | AMOUNT | | OURCE |
| | 2007 \$23,400.00 | Chicago & Mid | west Regional Joint Board |

Family Focus

Family Focus

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF

DATES OF PAYMENTS

AMOUNT

PAID

AMOUNT

STILL OWING

2

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR

AMOUNT STILL OWING

VALUE OF TRANSFERS

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT AMOUNT PAID AMOUNT STILL OWING

3

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DÅTE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships



a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE DATE OF ASSIGNMENT TERMS OF ASSIGNMENT OR SETTLEMENT None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE Of PROPERTY 4

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON

RELATIONSHIP TO DEBTOR, DESCRIPTION

OR ORGANIZATION

IF ANY

DATE OF GIFT AND VALUE OF GIFT

8. Losses



List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF

PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART

BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

April , 2006

\$300.00

NATIONAL FOUNDATION FOR DEBT

FR. FL SINCE OCT. 2005

\$680.00

10. Other transfers

1CAGO 16 60647

33760

5

None

List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None \mathbf{Z}

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S

INTEREST IN PROPERTY

11. Closed financial accounts



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS

DESCRIPTION OF

DATE OF TRANSFER OR SURRENDER,

TO BOX OR DEPOSITORY

CONTENTS

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

6

15. Prior address of debtor

None

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF

ENVIRONMENTAL

7

NOTICE LAW

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF

ENVIRONMENTAL

NOTICE LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business



a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

8

LAST FOUR DIGITS OF SOC. SEC. NO./ **BEGINNING AND** NAME COMPLETE EIN OR ADDRESS NATURE OF BUSINESS **ENDING DATES** OTHER TAXPAYER I.D. NO. b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as Z defined in 11 U.S.C. § 101. NAME **ADDRESS** The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time. (An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.) 19. Books, records and financial statements a. List all bookkeepers and accountants who within two years immediately preceding the filing of this **V** bankruptcy case kept or supervised the keeping of books of account and records of the debtor. DATES SERVICES RENDERED NAME AND ADDRESS b. List all firms or individuals who within two years immediately preceding the filing of this bankruptcy \checkmark case have audited the books of account and records, or prepared a financial statement of the debtor. NAME **ADDRESS** DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

| None | d. List all financial institutions, creditors and other parties, including financial statement was issued by the debtor within two years immediately. | | | ediately preceding the commencement of this ca | | |
|------------|--|---|--|--|--|--|
| | | NAME AND ADDRES | SS | DATE ISSUED | | |
| | 20. | Inventories | | | | |
| None | | | nventories taken of your property, the na dollar amount and basis of each inventor | | | |
| | | DATE OF INVENTORY | INVENTORY SUPERVISOR | DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis) | | |
| None ✓ | | List the name and address of t | he person having possession of the reco | rds of each of the inventories reported | | |
| | | DATE OF INVENTORY | | NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS | | |
| None | 21 a. | | , Directors and Shareholders | rship interest of each member of the | | |
| ∠ I | | partnership. NAME AND ADDRESS | NATURE OF INTEREST | PERCENTAGE OF INTEREST | | |
| None | b. | | n, list all officers and directors of the corcontrols, or holds 5 percent or more of the | | | |
| | | NAME AND ADDRESS | TITLE | NATURE AND PERCENTAGE OF STOCK OWNERSHIP | | |
| | | , | | | | |
| | 22 | . Former partners, officers, | directors and shareholders | • | | |
| None | a. | If the debtor is a partnership preceding the commenceme | | the partnership within one year immediately | | |
| | | NAME | ADDDESS | DATE OF WITHOUAWAI | | |

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation



If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.



If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.



If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

| [If completed by an individual or individual a | nd spouse] | | |
|--|--|---|---|
| I declare under penalty of perjury that I have reany attachments thereto and that they are true | ead the answers contained and correct. | I in the foregoing stateme | nt of financial affairs and |
| Date 10-15-2007 | Signature of Debtor | Usocils | Caffed |
| Date | Signature of Joint Debtor (if any) | | · · · · · · · · · · · · · · · · · · · |
| | | | |
| [If completed on behalf of a partnership or corporation | 1 | | · · · · · · · · · · · · · · · · · · · |
| I, declare under penalty of perjury that I have read the a that they are true and correct to the best of my knowled | nswers contained in the forego ge, information and belief | ing statement of financial affai | rs and any attachments thereto an |
| Date | Signature | | <u> </u> |
| | . 5 | rint Name and Title | |
| | Pi | int Name and Title | |
| | continuation sheets atta | | |
| Penalty for making a false statement: Fine of | up to \$500,000 or imprisonment | for up to 5 years, or both. 18 U.S | S.C. §§ 152 and 3571 |
| DECLARATION AND SIGNATURE OF NO I declare under penalty of perjury that: (1) I am a bankrup compensation and have provided the debtor with a copy of the 342(b); and, (3) if rules or guidelines have been promulgated petition preparers, I have given the debtor notice of the maxi- debtor, as required by that section. | tcy petition preparer as defined his document and the notices at 1 pursuant to 11 U.S.C. 8 110(t | in 11 U.S.C. § 110; (2) I prepared information required under | pared this document for 11 U.S.C. §§ 110(b), 110(h), and |
| Printed or Typed Name and Title, if any, of Bankruptcy Petit | ion Preparer | Social Security No | (Required by 11 U.S.C. § 110.) |
| If the bankruptcy petition preparer is not an individual, state person, or partner who signs this document. | the name, title (if any), addres | s, and social security number (| of the officer, principal, responsib |
| Address | | | · |
| X | | | Date |
| Names and Social Security numbers of all other individuals value an individual: | vho prepared or assisted in prep | paring this document unless the | e bankruptcy petition preparer is |
| if more than one person prepared this document, attach addit | ional signed sheets conforming | to the appropriate Official Fo | rm for each person. |

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.

Case 07-19932

hearings thereof;

Doc 1 Filed 10/26/07 Entered 10/26/07 13:24:56 Desc Main

United States Bankruptcy Court

ORTHERN District Of

| In re | |
|---|---|
| ENGLAND, ARAC | EEUS Case No. |
| Debtor | Chapter |
| DISCLOSURE OF COMP | ENSATION OF ATTORNEY FOR DEBTOR |
| named debtor(s) and that compensation bankruptcy, or agreed to be paid to me, in contemplation of or in connection wi | |
| For legal services, I have agreed to accept | 1,300.00 Civiculary Film |
| Fuol to me mind of this amminent i make | 9 (BUSINGU |
| Balance Due | <u>06.000.7</u> |
| 2. The source of the compensation paid to | me was: |
| ☑ Debtor ☐ Other | (specify) |
| 3. The source of compensation to be paid | to me is: |
| Debtor Other | (specify) |
| 4. have not agreed to share the above members and associates of my law t | s-discipsed compensation with any other person unless they are firm. |
| I have agreed to share the above-dis members or associates of my law fit the people sharing in the compensa | iclosed compensation with a other person or persons who are not me. A copy of the agreement, together with a list of the names of ition, is attached. |
| 5. In return for the above-disclosed fee, I case, Including: | have egreed to render legal service for all aspects of the bankruptcy |
| a. Analysis of the debtor's financial sit to file a petition in bankruptcy; | tuation, and rendering advice to the debtor in determining whether |
| b. Preparation and filing of any petition | on, schedules, statements of affairs and plan which may be required; |

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned

OZF/FOR DEBTOR (Continued)

| ri Ra | presentation of the debtor | in adverser | v proceedings and | other cor | ntested ba | nkruptcy | matter | 6, |
|-------|----------------------------|-------------|-------------------|-----------|------------|----------|--------|----|
|-------|----------------------------|-------------|-------------------|-----------|------------|----------|--------|----|

e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.

Case 07-19932 Doc 1 Filed 10/26/07 Entered 10/26/07 13:24:56 Desc Main Page 36 of 47 Document

| Official Form 224 (Chantor 7) (10/06) | |
|---------------------------------------|--|
| Official Form 22A (Chapter 7) (10/06) | According to the calculations required by this statement: |
| In re ENGLAND, ARACELIS Debtor(s) | ☐ The presumption arises. |
| 3500.(0) | ☑ The presumption does not arise. |
| Case Number:(If known) | (Check the box as directed in Parts I, III, and VI of this statement.) |
| (11 KHOWH) | |

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME

| | | Part I. EXCLUSION | NS | | | | |
|-------------|---|--|---|--------------------------------|-----------------|----------------|--|
| | Vetera | are a disabled veteran described in the Veteran n's Declaration, (2) check the box for "The pres rification in Part VIII. Do not complete any of th | umption does not arise" at the top of | f this s | | | |
| 1 | fined in | teran's Declaration. By checking this box, I den 38 U.S.C. § 3741(1)) whose indebtedness occur in 10 U.S.C. § 101(d)(1)) or while I was perform | urred primarily during a period in wi | hich I v | vas on active o | uty (as de- | |
| | Par | t II. CALCULATION OF MONTH | LY INCOME FOR § 707(b |)(7) | EXCLUSI | ON | |
| | Marita | al/filing status. Check the box that applies an | d complete the balance of this part of | of this s | statement as d | irected. | |
| | 1 | Inmarried. Complete only Column A ("Debto | _ | | | | |
| 2 | ali in | Married, not filing jointly, with declaration of septy of perjury: "My spouse and I are legally sepag apart other than for the purpose of evading the conly Column A ("Debtor's Income") for | rated under applicable non-bankrup he requirements of § 707(b)(2)(A) o | tcy law | or my spouse | and I are liv- | |
| | c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11. | | | | | | |
| | d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B Lines 3-11. | | | | | come") for | |
| | six cal before | ures must reflect average monthly income receivendar months prior to filing the bankruptcy case the filing. If the amount of monthly income vathe six-month total by six, and enter the result | Column A Debtor's Income | Column B Spouse's Income | | | |
| 3 | Gross | wages, salary, tips, bonuses, overtime, co | mmissions. | | \$ 2,400.00 | \$ | |
| | a and than z | ne from the operation of a business, profes enter the difference in the appropriate column(ero. Do not include any part of the busines on in Part V. | s) of Line 4. Do not enter a number | less | | | |
| 4 | a. | Gross receipts | \$ | | | | |
| | b. | Ordinary and necessary business expenses | \$ | | | | |
| | C. | Business income | Subtract Line b from Line a | | \$ 0.00 | \$ | |
| | in the | and other real property income. Subtract Li appropriate column(s) of Line 5. Do not enter art of the operating expenses entered on L | a number less than zero. Do not in | | | | |
| 5 | a. | Gross receipts | \$ | | | | |
| | b. | Ordinary and necessary operating expenses | \$ | | | | |
| | c. | Rent and other real property income | Subtract Line b from Line a | | \$0.00 | \$ | |
| 6 | Inter | est, dividends and royalties. | | | \$ 0.00 | \$ | |
| | | 7 Pension and retirement income. | | | | | |

| 9 | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: | | | | • | | | |
|----|---|--|--|-------------------------------|---------------------------------------|----------|---------|---------|
| | Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ Spouse \$ | | | | | \$ | \$0,00 | \$ |
| 10 | Do not i | from all other sources. If necess nclude any benefits received under of a war crime, crime against human. Specify source and amount. | r the Social Security | y Act or p | ayments received | as | | |
| 10 | a. | | | | \$ |] | | |
| | b. | | | | \$ | | | |
| | Total and enter on Line 10 | | | | | \$ | 0.00 | \$ |
| 11 | Subtota Column A total(s). | al of Current Monthly Incom A, and, if Column B is completed, a | e for § 707(b)(7 dd Lines 3 through | 7). Add I 10 in Col | ines 3 thru 10 in umn B. Enter the | \$ | 2400.00 | \$0 |
| 12 | Total Current Monthly Income for § 707(b)(7). If Column B has been complete | | | | d, en | z,400.00 | , | |

| | Part III. APPLICATION OF § 707(b)(7) EXCLUSION | |
|----|--|--------------------------------------|
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result. | \$28,800.00 |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | |
| | a. Enter debtor's state of residence: ILLINOIS b. Enter debtor's household size: 1 | \$41,650.00 |
| | Application of Section 707(b)(7). Check the applicable box and proceed as directed. | |
| 15 | The amount on Line 13 is less than or equal to the amount on Line 14. Check the box sumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete or VII. | for "The pre- ete Parts IV, V, VI |
| | The amount on Line 13 is more than the amount on Line 14. Complete the remaining pament. | rts of this state- |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

| | Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(| | | | |
|----|---|------|--|--|--|
| 16 | Enter the amount from Line 12. | \$ O | | | |
| 17 | Marital adjustment. If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. If you did not check box at Line 2.c, enter zero. | \$ | | | |
| 18 | Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result. | \$ 0 | | | |

| Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(| | | | |
|---|---|---------|--|--|
| Subpart A: Deductions under Standards of the Internal Revenue Service (Ii | | | | |
| 19 | National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | \$ 0.00 | | |
| 0A | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). | \$ 0.00 | | |

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Official Form 22A (Chapter 7) (10/06) – Cont.

| | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero. | | | | | | |
|-----|--|--|---|--------|--|--|--|
| 20B | a. | IRS Housing and Utilities Standards; mortgage/rental expense | \$ | | | | |
| | b. | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 | \$ | | | | |
| | c. | Net mortgage/rental expense | Subtract Line b from Line a. | | | | |
| | | | | \$0.00 | | | |
| 21 | Local Standards: housing and utilities; adjustment. if you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: | | | | | | |
| | | | | \$0.00 | | | |
| | are ent | Standards: transportation; vehicle operation/public to the standards allowance in this category regardless of whether whicle and regardless of whether you use public transportation. | er you pay the expenses of operat- | | | | |
| 22 | Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. | | | | | | |
| | Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | | |
| 23 | of vehice pense for the second | Standards: transportation ownership/lease expense; cles for which you claim an ownership/lease expense. (You may not for more than two vehicles.) 2 or more. in Line a below, the amount of the IRS Transportation Standards, owww.usdoj.gov/ust/ or from the clerk of the bankruptcy court); earthly Payments for any debts secured by Vehicle 1, as stated in Liter the result in Line 23. Do not enter an amount less than zero | Ownership Costs, First Car (avail- nter in Line b the total of the Aver- ne 42; subtract Line b from Line a | | | | |
| | a. | IRS Transportation Standards, Ownership Costs, First Car | \$ | | | | |
| | b. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 | \$ | | | | |
| | C. | Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a. | \$ | | | |
| | | Standards: transportation ownership/lease expense, you checked the "2 or more" Box in Line 23. | Vehicle 2. Complete this Line | | | | |
| 24 | (availa Averag | in Line a below, the amount of the IRS Transportation Standards, ble at www.usdoj.gov/ust/ or from the clerk of the bankruptcy coule Monthly Payments for any debts secured by Vehicle 2, as stated and enter the result in Line 24. Do not enter an amount less the | rt); enter in Line b the total of the in Line 42; subtract Line b from | | | | |
| | a. | IRS Transportation Standards, Ownership Costs, Second Car | \$ | | | | |
| | b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 | \$ | | | | |
| | c. | Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a. | \$0.00 | | | |
| 25 | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. | | | | | | |
| 26 | Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions. | | | | | | |

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Official Form 22A (Chapter 7) (10/06) - Cont. 4 Other Necessary Expenses: life insurance. Enter average monthly premiums that you actually 27 pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, \$ for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you 28 are required to pay pursuant to court order, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the average monthly amount that you actually expend 30 on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. \$ Other Necessary Expenses: health care. Enter the average monthly amount that you actually 31 expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance or health savings accounts listed in Line 34. \$ Other Necessary Expenses: telecommunication services. Enter the average monthly amount that you actually pay for telecommunication services other than your basic home telephone service—such 32 as cell phones, pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 33 Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32. \$() Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories. Health Insurance а \$ 34 \$ h. Disability Insurance \$ c. Health Savings Account Total: Add Lines a, b and c \$0 Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an 35 elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. \$ Protection against family violence. Enter any average monthly expenses that you actually incurred 36 to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. \$ Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must pro-37 vide your case trustee with documentation demonstrating that the additional amount claimed is \$ reasonable and necessary. Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$125 per child, in providing elementary and secondary educa-38 tion for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. \$ Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not 39 to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary. \$ Continued charitable contributions. Enter the amount that you will continue to contribute in the 40 form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40 41 \$0

| | | | Subpart C: Deductions fo | r Deb | t Payment | |
|----|---|--|---|----------------------------------|--|-----|
| | erty the erage to each S gage d | at you own, list the nar Monthly Payment. The ecured Creditor in the | ured claims. For each of your de me of the creditor, identify the prope Average Monthly Payment is the tot 50 months following the filing of the ments of taxes and insurance requite page. | erty sec tal of all bankru | uring the debt, and state the Av- amounts contractually due to ptcy case, divided by 60. Mort- | - |
| 42 | | Name of Creditor | Property Securing the Debt | 60 |)-month Average Payment | |
| | a. | | | \$ | | |
| | b. | | | \$ | | |
| | c. | | | \$ | | |
| | | | | Tota | al: Add Lines a, b and c. | \$0 |
| 40 | ents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or fore-closure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. | | | | | |
| 43 | ļ | Name of Creditor | Property Securing the Debt | | /60th of the Cure Amount | |
| | а. | | | \$ | | |
| | b. | | | \$ | | |
| | c. | | | \$ | | |
| | <u></u> | | | Tot | al: Add Lines a, b and c | \$0 |
| 44 | | nents on priority cl rt and alimony claims), | aims. Enter the total amount of all divided by 60. | priority | claims (including priority child | \$ |
| | the fo | ter 13 administrat llowing chart, multiply t expense. | ive expenses. If you are eligible the amount in line a by the amount | to file a in line b | case under Chapter 13, complete , and enter the resulting adminis- | - |
| | a. | Projected average me | onthly Chapter 13 plan payment. | | \$ | |
| 45 | b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | |
| | c. | Average monthly adr | ninistrative expense of Chapter 13 o | case | Total: Multiply Lines a and b | \$0 |
| 46 | Total | Deductions for De | ebt Payment. Enter the total of Li | ines 42 | through 45. | \$0 |
| | | Cuban | t D: Total Deductions Allo | ····od | under 5 707(b)(2) | |
| | | Subpa | rt D: Total Deductions And | Men | under g / U/(U)(2) | |

| | Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION | |
|----|--|-----------------|
| 48 | Enter the amount from Line 18 (Current monthly income for § 707(b)(2)) | \$ ₀ |
| 9 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) | \$0 |
|) | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result | \$ ₀ |
| 1 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | \$0 |

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|-------|--|--------------------------------------|
| | Initial presumption determination. Check the applicable box and proceed as directed. | |
| | The amount on Line 51 is less than \$6,000 Check the box for "The presumption does not ari page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of | se" at the top of f Part VI. |
| 52 | ☐ The amount set forth on Line 51 is more than \$10,000. Check the box for "The presumpt top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Par complete the remainder of Part VI. | ion arises" at the tVII. Do not |
| | The amount on Line 51 is at least \$6,000, but not more than \$10,000. Complete the revision VI (Lines 53 through 55). | emainder of Part |
| 53 | Enter the amount of your total non-priority unsecured debt | \$ |
| 54 | Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. | \$ ₀ |
| | Secondary presumption determination. Check the applicable box and proceed as directed. | |
| 55 | The amount on Line 51 is less than the amount on Line 54. Check the box for "The prese arise" at the top of page 1 of this statement, and complete the verification in Part VIII. | amption does not |
| | ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the sumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. Yo plete Part VII. | box for "The pre- u may also com- |

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| | $\mathbf{L}_{\mathbf{M}}$ | ΔΩΙ | שמפע | |
|-----|---------------------------|-----|-------|--|
| な物を | 7000 | | ı ugç | |

Part VII: ADDITIONAL EXPENSE CLAIMS

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

55

| | Expense Description | Monthly Amount |
|----|------------------------------|----------------|
| а. | | \$ |
| b. | | \$ |
| c. | | \$ |
| | Total: Add Lines a, b, and c | \$ |

| 2001013 | | |
|---------|---|--|
| | Part VIII: | VERIFICATION |
| 200 | | |
| | I declare under penalty of perjury that the information | provided in this statement is true and/correct, (If this a joint case, |
| | both debtors must sign.) | |
| 56 | Date: 10-15-2007 | Signature: Museus Chiff |
| | Date: | Signature: |

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Form B 21 Official Form 21 (12/03)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

STATEMENT OF SOCIAL SECURITY NUMBER(S)

| I .Na | ame of Debtor (enter Last, First. Middle): | ENGLAND, ARACELIS. |
|---------|--|--|
| (Che | ck the appropriate box and, if applicable, | provide the required information.) |
| 四 | Debtor Social Security Number is: | 583-19-5853 |
| | Debtor does not have a Social Security 1 | Number. |
| 2.Nan | ne of Joint Debtor (enter Last, First, Midd) | e): |
| (Chec | k the appropriate box and, if applicable, p | provide the required information.) |
| | Joint Debtor Social Security Number is: | |
| | Joint Debtor does not have a Social Secu | rity Number. |
| I decla | re under penalty of perjury that the forego Neel Signature of Debtor | ing is true and correct. 10-15-2007 Date |
| х | Signature of Joint Debtor | Date |

^{*}Joint debtors must Provide information for both spouses.

Penalty for making a false statement: Fine of up to \$250,000 or up to 5 years imprisonment or both. 18 U.S.C. §§

152 and 3571.

Certificate Number: 03591-ILN-CC-002055376

CERTIFICATE OF COUNSELING

| I CERTIFY that on June 18, 2007 | , а | t 3:39 | o'clock PM CDT, | | |
|---|-----------|----------------|----------------------------------|--|--|
| Aracelis England | | receive | d from | | |
| Chestnut Health Systems, Inc. | | | · | | |
| an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the | | | | | |
| Northern District of Illinois | , a | n individual [| or group] briefing that complied | | |
| with the provisions of 11 U.S.C. §§ 109(h) and 111. | | | | | |
| A debt repayment plan was not prepared . If a debt repayment plan was prepared, a copy of | | | | | |
| the debt repayment plan is attached to this | certifica | te. | | | |
| This counseling session was conducted by telephone | | | | | |
| | | // | .62 | | |
| Date: June 18, 2007 | Ву | Colin | LA TOR | | |
| | Name | CHERYL D F | OSTER | | |
| | Title | CERTIFIED O | CREDIT COUNSELOR | | |

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

| (Acct: 10000-000) | CHICAGO AND MIDWEST REGIONAL JOINT BOARD Vendor No: ENGA50 / Name: ARACELIS Invoice Desc 8/13-8/17 8/13-8/17 lechner strike | (Acct: 10000-000) | Vendor No: ENGA50 / Name: ARACELIS ENGLAND Invoice Desc 8/20-8/24 strike consultant 8/20-8/24 |
|---------------------|--|---------------------|---|
| Check Date 08/16/07 | ENGLAND Inv Date 08/16/07 | Check Date 08/24/07 | Inv Date 8/24 08/24/07 |
| Total | Inv Amt 600.00 | Total | Inv Amt 600.00 |
| \$600.00 | 160161 Amt Paid 600.00 | \$600.00 | 160310 Amt Paid 600.00 |

CHICAGO AND MOWSET (REGIONAL 2 JOHO GOARD Filed 10/26/07 Entered 10/26/07 13:24:56 Desc Main Vendor No: ENGA50 / Name: ARACELIS ENGLANMENT 153714 Page 46 of 47 Amt Paid Inv Amt Inv Date Desc Invoice 600.00 600.00 02/22/07 2/19-2/23 LECHNER STRIKE 2/19-2/23 \$600.00 Check Date 02/22/07 Total (Acct: 10000-000) 154846 CHICAGO AND MIDWEST REGIONAL JOINT BOARD VENDO'S ENGASO / Name: ARACELIS ENGLAND Amt Paid Inv Amt Inv Date Invoice 600.00 600.00 03/29/07 LECHNER STRIKE 3/26-3/30 3/26-3/30 \$600.00 Total Check Date 03/29/07 (Acct: 10000-000) CHICAGO AND MIDWEST REGIONAL JOINT BOARD ENGLAND Invoice 154667 Desc 3/19-3/23 LECHNER STRIKE 3/19-3/23 Inv Date Inv Amt Amt Paid 03/21/07 600.00 600.00

(Acct: 10000-000)

Check Date 03/22/07

Total

\$600.00

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| CHICAGO AND | MIDWEST REGIONAL JOINT BOARD O: ENGA50 / Name: ARACELIS ENGLAND | | | 160089 |
|-------------|---|----------|---------|----------|
| Invoice | Desc | Inv Date | Inv Amt | Amt Paid |
| 7/28/07 | EXP. REIMB. W.E. 7/28/07 | 08/11/07 | 68.36 | 68.36 |
| 7/7/07 | EXP. REIMB. W.E. 7/7/07 | 08/11/07 | 40.01 | 40.01 |
| 8/6-8/10 | LECHNER STRIKE 8/6-8/10 | 08/11/07 | 600.00 | 600.00 |
| | | | | |

(Acct: 10000-000) Check Date 08/11/07 Total \$708.37

/

CHICAGO AND MIDWEST REGIONAL JOINT BOARD INVESTOR ENGLAND

Invoice Desc Inv Date Inv Amt Amt Paid 7/30-8/3 LECHNER CONSULT. 7/30-8/3 08/02/07 600.00 600.00

(Acct: 10000-000) Check Date 08/02/07 Total \$600.00